

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

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Full Legal Name of Service Provider: SEMAPHORE CORPORATION

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 2001 6TH AVENUE, STE. 400, SEATTLE, WA 98121

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** GARTH BROWN

Full Address of Designated Agent to Which Notification Should Be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

2001 6TH AVENUE, STE. 400, SEATTLE, WA 98121

Telephone Number of Designated Agent: +1-206-443-0651

Facsimile Number of Designated Agent: +1-206-443-0718

Email Address of Designated Agent: COPYRIGHT@SEMAPHORE.COM

Signature of Officer or Representative of the Designating Service Provider:

Date: 11-14-98

Typed or Printed Name and Title: GARTH BROWN, PRESIDENT

Note: This Interim Designation Must Be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.